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Bib Data Sheet

CONFIRMATION NO. 3635

SERIAL NUMBER 09/761,114	FILING DATE 01/16/2001 RULE	CLASS 725	GROUP ART UNIT 2621	ATTORNEY DOCKET NO. 2008.003
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APPLICANTS

Freddie Lin, Redondo Beach, CA;

Ling Sha, Los Angeles, CA;

Frank Tian, Temple City, CA; Duke Tran, Norwalk, CA;

** CONTINUING DATA *None B.* *****

** FOREIGN APPLICATIONS *None B.* *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 02/22/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 12	TOTAL CLAIMS 44	INDEPENDENT CLAIMS 7
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	<i>B.</i> Initials			

ADDRESS

1054

LEONARD TACHNER, A PROFESSIONAL LAW CORPORATION

17961 SKY PARK CIRCLE, SUITE 38-E

IRVINE, CA

92614

TITLE

Uncompressed IP multimedia data transmission and switching

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)